UNITED STATES FORM D JRITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 MAR & O 2067 FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6) AND/OR** ORM LIMITED OFFERING EXEMPTION

1359542

OMB APPROVAL 3235-0076 OMB NUMBER: April 30, 2008 Expires: timated average burden

Name of Offering (check if this is a	n amendment and name has changed, and indicate chang	ge.)
Offer and Sale of Convertible Promissor	y Notes	
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐	Section 4(6) ULOE
	Amendment	<u> </u>
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about th		<u> </u>
Name of Issuer (Check if this is an an	nendment and name has changed, and indicate change.)	•
Retica Systems, Inc.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
201 Jones Road, Waltham, MA 02451		.781-547-0400
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	•	PROCESSED
Brief Description of Business		APR 0 9 2007 THOMSON FINANCE
		P. APR U 9 2007
Developer of biometric devices.		THOUSE
, ,		FILOMSON
		- FINANCIAL
Type of Business Organization		
corporation		other (please specify):
business trust	☐ limited partnership, to be formed	
	Month Ye	<u>ar</u>
	[0 [6] · [0 [6	D Actual ☐ Estimated
Actual or Estimated Date of Incorporation	or Organization:	
Jurisdiction of Incorporation or Organization	on: (Enter two-letter U.S. Postal Service abbreviation for	D E
	CN for Canada; FN for other foreign jurisdiction)	ے ہے ۔

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

SEC 1972 (6/02)

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Each beneficial owner convictes of the issuer	having the power to and director of corp	ovote or dispose, or direct solutions and of corporate issuers and of corporatership issuers.	the vote or disposition of, ate general and managing		nership issuers; and
Check Box(es) that Apply:	☐ Promoter		☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if inc	dividual)		-	•	
Muller, David F.					
Business or Residence Address		er and Street, City, State, 2	Cip Code)		
c/o Retica Systems, Inc., 201 Jor			0.00	S Discours	☐ General and/or
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	Managing Partner
Full Name (Last name first, if in	dividual)		••		
Dale, Richard M.					
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		•
c/o Sigma Partners, 20 Custom I					- Consent and/or
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)		· · · · · · · · · · · · · · · · · · ·		
Mandile, John R.	•	•			
Business or Residence Address	(Numb	er and Street, City, State, 2	Zip Code)	•	•."
c/o Sigma Partners, 20 Custom I	House Street, Suite	830, Boston, MA 02110			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	□ Director □	☐ General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
Manning, John P.					
Business or Residence Address	(Numb	er and Street, City, State,	Zip Code)		
c/o Retica Systems, Inc., 201 Jo	nes Road, Waltham	, MA 02451			
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partne
Full Name (Last name first, if in	ndiyidual)				
Sigma Partners 6, L.P.		:	_	<u> </u>	·
Business or Residence Address	(Numb	per and Street, City, State,	Zip Code)		
20 Custom House Street, Suite				– Disside	☐ General and/or
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	Managing Partne
Full Name (Last name first, if in	ndividual)			_	
Business or Residence Address	(Numb	per and Street, City, State,	Zip Code)	·	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partne
Full Name (Last name first, if in	ndividual)	•	•	<u></u>	
	•	•	<u> </u>		
Business or Residence Address	(Num	ber and Street, City, State,	Zip Code)		· · · · · · · · · · · · · · · · · · ·

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

				B. INFO	RMATIO	N ABOU'I	OFFERIN	(G				
1. Has the issi	uer sold, or	does the is	suer intend	to sell, to n	on-accredit	ed investor	rs in this off	ering?				⊠ .
			Ansv	ver also in A	Appendix, C	Column 2,	if filing und	er ULOE.				
2. What is the	e minimum	investment	that will be	accepted f	rom any inc	dividual?					\$_N/A_	
	,									,	Yes ?	No
3. Does the of				•							×	□
4. Enter the commission If a person or states, lie a broker or	n or similar to be listed st the name	remuneration is an associate of the broken	ion for solic iated persor ker or dealer	itation of p n or agent o r. If more ti	urchasers in f a broker o han five (5)	n connection or dealer re persons to	on with sale gistered wit o be listed a	s of securiti h the SEC a	es in the of ind/or with	fering. a state		•
Full Name (La									-			
Business or R	esidence A	ddress (Nu	mber and St	treet, City, S	State, Zip C	Code)	<u> </u>					
N C.		lees Deal		_				_	<u> </u>			
Name of Asso	ciated Bro	ker of Deal	er'									
		·										
States in Which	ch Person I	isted Has S	Solicited or ividual Stat	Intends to S	Solicit Purcl	hasers						All States
(Check "7	Alistate o	[AZ]	AR]	(CA)	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
(بند) (IL)	[IN]	[IA]	[KS]	[KY]		[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	[NE]	[NV]	[NH]	[[[[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[MT] [RI]	[SC]	[SD]	[TN]	[TX]	ניייז] [עדן	[VT]	[VA] .	[WA]	[WV]	[WI]	[WY]	[PR]
Business or R	tesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)		•	 _		<u></u>	
Name of Asso	ociated Bro	ker or Deal	ег				-					
States in Whi	ch Person l	Listed Has	Solicited or lividual Stat	Intends to S	Solicit Purc	hasers	<u> </u>		···			All States
· [AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HJ)	[D]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
(MT)	[NE]	[NV]		[[[(NM)	INYI	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L				[1	[]						 	
										•		
Business or R	Residence A	Address (Nu	mber and S	treet, City,	State, Zip (Code)			-			
Name of Asse	ociated Bro	ker or Deal	ler									
			_	· ·			-					
States in Whi (Check "			Solicited or dividual Sta			hasers ·						All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI] ·	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
rnn '	(cc)	teni	· LLVII	ttvi .	ri m	(VT)	(VA)	ΓŴΑΊ	rwvi	ſWΠ	ſWYI	(PR)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	A	Amount Already
	Type of Security	Aggregate Offering Price	Sold
	Debt	\$ 0	\$_0
	Equity	\$ 0	\$
		•	
	☐ Common ☑ Preferred		•
•	Convertible Securities (including warrants)		\$ <u>675,000.00</u>
,	Partnership Interests	\$ <u>0</u>	\$ <u>0</u>
	Other (Specify)	\$ 0	\$ <u>0</u>
:	Total	\$ 675,000.00	
,	Answer also in Appendix, Column 3, if filing under ULOE.	•	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
		* 1	
	Accredited Investors		\$ <u>675,000.00</u>
	Non-accredited Investors	. 0	\$ <u> </u>
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	<u>N/A</u>	\$ <u>N/A</u>
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$ <u>N/A</u>
	Regulation A		\$ <u>N/A</u>
	Rule 504		\$ <u>N/A</u>
	Total	N/A	\$ <u>N/A</u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		□ \$ <u>0</u>
	Printing and Engraving Costs		□ \$ <u>`</u> 0
	Legal Fees		S \$10,000
	Accounting Fees		<u> </u>
	Engineering Fees		<u> </u>
	Sales Commissions (specify finders' fees separately)		S 0
	Other Expenses (identify) Blue Sky Filing Fees (MA)		S \$250
	Total		\$ \$10,250

C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1 and total expenses furnished in response	e offering price given in response to Part C - Question to Part C - Question 4.a. This difference is the		\$ <u>664,750</u>
used for each of the purposes shown. If the a	oss proceeds to the issuer used or proposed to be unount for any purpose is not known, furnish an estimate. The total of the payments listed must equal orth in response to Part C - Question 4.b above.		
:	,	Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		\$ 0	□ \$ <u>0</u>
		s 0	\$ 0
	on of machinery and equipment	□ \$ _0	\$ 0
	s and facilities		\$_0
Acquisition of other businesses (including offering that may be used in exchange for	ng the value of securities involved in this		□ \$ 0
			□ \$ 0
			■ \$ 664,750
•		□ \$ 0	□ \$ 0
			S 664,750
Column Totals			•
Total Payments Listed (column totals ad	ded)	⊠ \$_	664,750
	D. FEDERAL SIGNATURE		i
The issuer has duly caused this notice to b	e signed by the undersigned duly authorized person. If ng by the issuer to furnish to the U.S. Securities and Excissuer to any non-accredited investor pursuant to paragra	hange Commission, u	ipon written request
Issuer (Print or Type)	Signature	Date	_
Retica Systems, Inc.		March 28, 2	007
Name of Signer (Print or Type)	Title of Signer (Print or Type)		<u> </u>
David F. Muller	President and CEO		

- ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Land and The State of the Control of the	E: STATE SIGNATURE	7
Is any party described in 17 CFR 230.262 pr of such rule?	esently subject to any of the disqualification provisions	Yes No □ ⊠
	See Appendix, Column 5, for state response.	
2. The undersigned issuer hereby undertakes to Form D (17 CFR 239,500) at such times as	furnish to any state administrator of any state in which this no required by state law.	tice is filed, a notice on
3. The undersigned issuer hereby undertakes to issuer to offerees.	furnish to the state administrators, upon written request, infor	mation furnished by the
limited Offering Exemption (ULOE) of the	suer is familiar with the conditions that must be satisfied to be state in which this notice is filed and understands that the issu thing that these conditions have been satisfied.	entitled to the Uniform er claiming the availability
The issuer has read this notification and knows undersigned duly authorized person.	the contents to be true and has duly caused this notice to be significant.	gned on its behalf by the
Issuer (Print or Type)	Signature	Date
Retica Systems, Inc.		March 28, 2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)	· · · · · · · · · · · · · · · · · · ·
Name of Signer (Finit of Type)	The of Signer (Thin of 1)po)	•

President and CEO

David F. Muller

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to non-a	2 to sell accredited s in State 3-Item 1	Type of security and aggregate offering price offered in state (Part C Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No .	Convertible Promissory Notes	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK .									
ΑZ								ė.	
AR									
CA								v	
СО								,	
СТ							,		
DE							1		
DC			•						
FL									
GA							<u> </u>		<u> </u>
НІ						·			
ID					•		<u> </u>	,	
IL									
IN								_	
IA			,						
KS							•	_	
KY			а						
LA									
ME									
MD									
MA		X	\$675,000	3	\$675,000	0	\$0		X
MI									
MN									
MS									

APPENDIX

. 1	Intend to non-a investor	i to sell accredited rs in State 3-Item 1	Type of security and aggregate offering price offered in state (Part C Item 1)		Type of amount pu	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Convertible Promissory Notes	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MO				,					
MT									
NE :	·								
NV									
NH									· .
NJ		·						, •	
NM									<u> </u>
NY					·	ŀ			
NC									•
ND				•					-
ОН				•	•				
OK							•		
OR					•				
PA									
RI									
SC						·			
SD	-					,		<u>.</u>	
TN								·	
TX					,				,
UT				•	_		ļ		
VT								•	
VA							,		
WA				_				·	
WV									
WI									

1	2	<u>-</u>	3	,	4	4	,.	5	<u> </u>			
to r inv	ntend to sell non-accredited restors in State Part B-Item 1		Type of security and aggregate offered in state (Part C Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			amount purchased in State			Disqualif under Stat (if yes, explanat waiver g (Part E-I	e ULOE attach tion of ranted)
State	Yes	No	Convertible Promissory Notes	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
WY		•		. ,								
PR				•		. +	<u>.</u>		•			
Intern'l.	•								<u> </u>			

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